

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN9507	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED R 12/27/2019
NAME OF PROVIDER OR SUPPLIER PAVILION-THS, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 1406 MEDICAL CENTER DRIVE LEBANON, TN 37087		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 000	Initial Comments A Life Safety revisit survey was conducted on 12/27/2019 for the previous deficiencies cited on 10/28/2019. The deficiencies have been corrected, and no new non compliance was found. The facility is in compliance with all regulations surveyed.	N 000		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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(X6) DATE

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N 001	1200-8-6 Initial Comments This Rule is not met as evidenced by: A Life Safety Code Survey was conducted by the State of Tennessee Department of Health Division of Health Licensure and Regulations Office of Health Care Facilities on 10/28/2019. During this Life Safety Survey, Pavilion-Ths, llc was found not in substantial compliance with the requirements for The Rules of Tennessee Department of Health Board for Licensing Health Care Facilities Chapter 1200-08-06 Standards For Nursing Homes, and National Fire Protection Association (NFPA) 101 Life Safety (2012 Edition). * All penetrations requiring Fire Stop shall be repaired in accordance with a tested and approved Fire Stop System meeting the requirements of ASTM E 814, Standard Test Method for Fire Tests of Through Penetration Fire Stops, or ANSI/UL 1479, Standard for Fire Tests of Through-Penetration Firestops. The system used shall be recorded and documentation shall be maintained for the life of the installation. Fire Stop Systems should be on site and available for surveyors on the follow-up visit. Any Engineering Judgements requires state approval before installation.	N 001		
N 831	1200-8-6-.08 (1) Building Standards (1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.	N 831		

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If continuation sheet 1 of 3

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N 831	Continued From page 1 This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the physical environment. The findings included: 1. Observation on 10/28/2019 at 8:51 AM, revealed a bundle of low voltage wires penetrating the ceiling that were not sealed. This was located in the Medical Records office Data room. NFPA 101, 8.3.5 (2012 Edition) 2. Observation on 10/28/2019 at 9:08 AM, revealed the following: a. Outside boiler room had 4 (3 inch) black PVC pipes penetrating the ceiling not properly sealed b. Outside boiler room had a bundle of low voltage wires not properly sealed on the backside and mixed fire caulk NFPA 101, 8.3.5 (2012 Edition) 3. Observation on 10/28/2019 at 9:13 AM, revealed a mechanical gas line with a 1/2 inch yellow colored flex pipe penetrating the ceiling not properly sealed. This was located in the upstairs mechanical room. NFPA 101, 8.3.5 (2012 Edition) 4. Observation on 10/28/2019 at 9:18 AM, revealed the following: a. 1/4 inch metal flex conduits x3 penetrating the wall sealed with (sheetrock mud) b. A single sprinkler pipe (1 inch plus) sealed with (sheetrock mud) These were located upstairs on a rated gypsum wall within a walk through metal door located next to the mechanical room by the exit stairs.	N 831	N 831 1)The Maintenance Director removed all old fire caulk and applied new approved fire caulk around the bundle of low voltage wires located in the Medical Records office Data room. 2)A)The Maintenance Director placed firestop collars around the 4 (3 inch) black PVC pipes located in boiler room. 2)B)The Maintenance Director removed all old fire caulk and applied new approved fire caulk around the bundle of low voltage wires located in boiler room. 3)The Maintenance Director removed all old fire caulk and applied new approved fire caulk around the mechanical gas line penetrating the ceiling. 4)A)The Maintenance Director is in communication with Will Lane at Care Supply Co in Nashville, TN to schedule an Engineering Determination for the wall w/ 1/4 inch metal flex conduits x3. We will then construct or change the wall per recommendations. 4)B)The Maintenance Director is in communication with Will Lane at Care Supply Co in Nashville, TN to schedule an Engineering Determination for the wall w/ a single sprinkler pipe. We will construct or change the wall per recommendations.	12/13/19

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N 831	Continued From page 2 NFPA 101, 8.3.5 (2012 Edition) The Maintenance Director was present when these findings were identified and they were acknowledged by the Administrator during the exit conference on 10/28/2019.	N 831	N 831 All residents have the potential of being affected by the deficient practice. The Maintenance Director will continue to follow procedures for reviewing walls throughout the facility. Any deficient practices or findings will be reported to the Quality Assurance Committee.	

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